

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 121Registered No. 147

1. PLACE OF BIRTH

County Gila State Ariz.
District or Township _____ or Village _____
City Globe No. _____ (If birth occurred in a hospital or institution, give its NAME instead of street and number)
St. _____ Ward _____

2. Full name of child

Carlos Duarte

If child is not yet named, make supplemental report, as directed.

3. Sex of Child

MaleTo be answered ONLY
in event of plural
births.

4. Twin, triplet or other

5. No., in order of birth

6. Legitimate?

Yes

7. Date

of birth

Aug. 12, 1928
Month Day Year

8.

FATHER

Full name

Jesús Duarte

9. Residence

(Usual place of abode)

If non-resident, give place and state.

GlobeAriz.

10. Color or race

Mexican11. Age at last birthday 38 (Years)

12. Birthplace (city or place)

(State or country)

Mexico

13. Occupation

Nature of industry

miner

14.

MOTHER

Full maiden name

Carlota Chavez

15. Residence

(Usual place of abode)

If non-resident, give place and state.

GlobeAriz.

16. Color or race

Mexican17. Age at last birthday 29 (Years)

18. Birthplace (city or place)

(State or country)

Mexico

19. Occupation

Nature of industry

housewife20. Number of children of this mother 4(Taken as of time of birth of child herein
certified and including this child.)(a) Born alive and now living 4(b) Born alive but now dead 0(c) Stillborn 0

21. Were precautions taken against ophthalmia neonatorum?

Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was

born alive
(Born alive or stillborn.)at 11:20 A.m. on the date above stated

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature

T. C. Harper

(Physician or midwife).

Given name added from
a supplemental report

Month, day, year

Address

Globe, Arizona

Filed

9/13, 1928 E. E. Weyhmann Inds

Registrar

Registrar

345-812-339